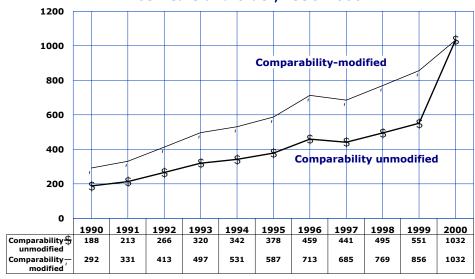
The magnitude of the increases in mortality from Alzheimer's disease (Figure be may problematic. The available comparability ratio Alzheimer's disease 1.5536 is based on the 1996 U.S. mortality data, and it may substantially underestimate later increases in 1997, 1998, and 1999. The comparability ratio based on 1999 data could be as high as 1.9

The comparability ratio of 1.9 applied to the (unmodified) 1999 data produce 1,047 would deaths from Alzheimer's disease (551X1.9) in that year, suggesting that mortality may have actually decreased from 1999 to 2000.

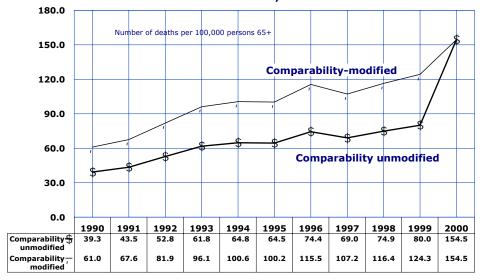
Figure 7
Comparability-modified* and Comparability-unmodified Mortality from Alzheimer's Disease Among Arizona Elderly Residents 65 Years and Older, 1990-2000



^{*} Comparability-modified: the annual number of deaths for 1990-1999 that would have been classified as Alzheimer's disease had the ICD-10 classification system and rules for coding been in place.

The magnitude of the increases in mortality rates Alzheimer's disease (Figure 8) is, of course, equally problematic. The comparability ratio of 1.9 (rather than 1.5536) applied to the (unmodified) 1999 rate would produce a comparability-modified rate 152.0 /100,000 (80.0X1.9) in that year, only slightly smaller than the rate recorded in the year 2000.

Figure 8
Comparability-modified* and Comparability-unmodified Mortality
Rates for Alzheimer's Disease Among Arizona Elderly Residents
65 Years and Older, 1990-2000



^{*} Comparability-modified rates: the rates based on the annual number of deaths for 1990-1999 that would have been classified as Alzheimer's disease had the ICD-10 classification system and rules for coding been in